



C. Earl Hunter, Commissioner

Promoting and protecting the health of the public and the environment

2008-2009 School Exclusion List

Official List of Conditions Requiring Exclusion from School for 2008-2009, with Guidance Section

Statutory authority: SC Code Sections 20-7-2980, 44-1-110, 44-1-140 and 44-29-10

Requirements.

SC Regulation #61-20 requires that SC DHEC publish each year an Official School and Childcare Exclusion List of Contagious and Communicable Diseases, hereinafter referred to as the Childcare Exclusion List or the School Exclusion List. SC #61-20 further requires that students should be excluded from school attendance if they have one or more of the conditions in these lists. Schools should maintain a record of students known to have been excluded under this regulation.

Parent Notification.

The school should give to all parents/guardians the list of conditions that require exclusion from school attendance. Distribution of summaries of the Exclusion Lists, such as the Parent Brochures developed by the SC DHEC Division of Acute Disease Epidemiology, satisfies this requirement. Schools should inform parents/guardians that they must notify the school within 24 hours after their student has developed a known or suspected communicable illness addressed on the School Exclusion List. Students may return to the school as soon as their symptoms are resolved, unless stated otherwise in the Exclusion List or by their health care provider.

Reporting to the Health Department.

Per SC Statute 44-29-10, "any person or entity that maintains a database containing health care data must report [to SC DHEC] all cases of persons who harbor any illness or health condition that may be caused by ... epidemic or pandemic disease, or novel and highly fatal infectious agents and might pose a substantial risk of a significant number of human fatalities or incidents of permanent or long-term disability." These conditions, indicated on the List of Reportable Conditions as Immediately or Urgently Reportable, must be reported to the local health department. Schools' reporting of Routinely Reportable conditions greatly facilitates local and state disease control efforts. Schools should consult with SC DHEC regarding outbreaks or clusters of symptoms related to communicable diseases or incidents of permanent or long-term disability."

The 2008-2009 School Exclusion List is effective July 1, 2008.

Guidance for Implementing the 2008-2009 School Exclusion List

- **Use in Schools.** The School Exclusion List applies to students in grades 1-12 who are not medically fragile.^A The separate **Childcare Exclusion List** should be used for students in grades K-3, K-4, and K-5, as well as students designated as being medically fragile.^A
- **Special Circumstances.** These Exclusion criteria are aimed at generally healthy children. Immunocompromised children with an excludable condition or exposure may need longer periods of exclusion, subject to recommendations by their health care provider(s). Nothing in these criteria precludes the exercise of the professional judgment of Local Education Agency medical and/or nursing staff to protect the health of students.
- **Exclusion criteria that vary** for younger students (primary grades or elementary 1st through 5th grade) and for older students (middle school, junior high or high school) are indicated in the Exclusion List. Intermediate schools (generally 5th and 6th graders) should follow the exclusion criteria for the youngest age students attending the school.
- **Mixed age groupings.** When students are taught or routinely spend time in mixed age groups, the standards for the youngest children in the group apply. If these children are Kindergarten age or younger, the criteria found in the Child Care Exclusion List apply.
- **Notes / Documentation for Return.** The type of note needed for a student to return to school is indicated in the tables that follow. Physicians, nurse practitioners, physician assistants or SC DHEC licensed health care professional staff may provide medical notes for return to school following an excludable condition. Medical notes, which document diagnosis, initiation of treatment, improvement in status, etc., and parent notes should be kept on file at the school for at least one calendar year. Medical notes may not shorten or abrogate the minimum period of exclusion required for any specific condition.
- **Period of Exclusion.** Infected children should be excluded from school until they are no longer considered contagious. If a student does not respond to treatment for an excludable condition, the health care provider or health department may suggest longer periods of exclusion.
- **Other Risks.** This list addresses common exposures to communicable disease. SC DHEC staff are available for consultation on specific exposure risks such as close contact sports, water sports, immunocompromised status, contact with animals, etc.

^A For the purposes of school exclusion, the term “medically fragile” refers to those students with special healthcare needs or developmental delays who require close assistance with feeding or other personal hygiene activities by which communicable illnesses may be easily spread.

Exclusion Criteria	Documentation for Return	Reportable to Health Department? ^B
<p>1. Exclude the student with symptoms or other manifestations of possible severe illness which may include (not limited to):</p> <ul style="list-style-type: none"> a. Fever (see #7 below) b. Difficulty breathing c. Unusual lethargy (an unusual tiredness or lack of energy) d. Unusually severe irritability e. Rapidly spreading rash 	School to specify based on situation.	Report Outbreaks only ^C
<p>2. Exclude students with diarrhea associated with Campylobacter until diarrheal symptoms are resolved. Students with prolonged diarrheal symptoms following 24 hours or more of antimicrobial therapy for Campylobacter may be re-admitted if cleared by the student's physician.</p>	Medical Note clearing student with prolonged symptoms after antimicrobial therapy. A Parent Note is sufficient if there has been no diarrhea for 24 hours.	Report within 7 days.
<p>3. Conjunctivitis</p> <ul style="list-style-type: none"> • Exclude students with purulent conjunctivitis (defined as pink or red conjunctivae with white or yellow eye discharge, often with matted eyelids after sleep and eye pain or redness of the eyelids or skin surrounding the eye), until evaluated and treated. • Non-purulent conjunctivitis (defined as pink conjunctivae with a clear, watery eye discharge without fever, eye pain or eyelid redness) <u>does not require exclusion from school.</u> 	<p>Medical Note documenting evaluation and treatment</p> <p>Not applicable</p>	<p>Report Outbreaks only ^C</p> <p>No</p>

C Report suspected outbreaks and clusters of diseases or symptoms that would not be reportable as single cases. An “Outbreak” in a school is defined as an excess number of cases or symptoms over the expected occurrence of disease within a school or classroom or group.

Students with the following conditions must be excluded from school attendance:

Exclusion Criteria	Documentation for Return	Reportable to Health Department? ^B
<p>4. Diarrhea</p> <ul style="list-style-type: none"> Exclude children in 1st through 5th grade with diarrhea (3 or more loose stools in a 24 hour period) that is not associated with <i>Campylobacter</i>, <i>E. coli</i>, <i>Giardia</i>, <i>Salmonella</i> or <i>Shigella</i> ^D until symptoms are resolved or medical evaluation indicates that inclusion is acceptable. Exclusion for diarrhea in 6th through 12th grade students is not mandatory unless: <ul style="list-style-type: none"> Diarrhea is caused by <i>E. coli</i>, <i>Salmonella</i> or <i>Shigella</i> (see #'s 5, 16 and 18 below), or A student is determined to be contributing to the spread of illness in the school setting. Exclusion is not required if student is known to have diarrheal symptoms for a non-infectious condition (e.g., IBS or Crohn's Disease), or if diarrheal symptoms persist after completion of effective antimicrobial therapy for an enteric illness such as <i>Campylobacter</i> or <i>Giardia</i>. Exclude students of any age with uncontrolled diarrhea or stools that contain blood or mucus, until symptoms are resolved or medical evaluation indicates that inclusion is acceptable. Exclusion is not required if student is known to have these symptoms for a non-infectious condition (e.g., IBS or Crohn's Disease), or if diarrheal symptoms persist after <u>completion</u> of effective antimicrobial therapy of an enteric illness such as <i>E. coli</i>, <i>Salmonella</i>, <i>Shigella</i>, <i>Giardia</i> or <i>Campylobacter</i>. 	<p>School to specify based on situation.</p> <p>Not applicable, unless one of the bulleted criteria applies, in which case a Medical Note is required.</p> <p>Not applicable.</p> <p>School to specify based on situation.</p>	<p>Report Outbreaks only ^C</p> <p>No</p> <p>Report Outbreaks only ^C</p>
<p>5. Exclude for infection with <i>Escherichia coli</i> O157:H7, or other shiga-toxin producing <i>E. coli</i>, until diarrhea resolves (24 hours pass without a diarrheal stool.)^E</p>	<p>Medical Note documenting diagnosis, and parent report of resolution of symptoms.</p>	<p>Report within 24 hours by phone.</p>

^D Exclusion Criteria for *Campylobacter*, *E. coli*, *Giardia*, *Salmonella* and *Shigella* infections are addressed separately in this document.

^E In this instance, the Exclusion requirement for *E. coli* is less stringent than that recommended in the 2006 Red Book. In-school transmission of *E. coli* infection is uncommon among children who do not require diapering. There may be an academic burden imposed by lengthy exclusions while awaiting multiple negative culture results. SC DHEC may change this Exclusion Criterion in the event of an outbreak or cluster of diarrheal illness attributable to *E. coli*.

Students with the following conditions must be excluded from school attendance:

Exclusion Criteria	Documentation for Return	Reportable to Health Department? ^B
6. Exclude for Fever , accompanied by behavior changes or other signs and symptoms of illness (such as sore throat, rash, vomiting, diarrhea, earache, irritability, or confusion) until medical evaluation indicates inclusion is acceptable. Fever is defined in school children as: <ul style="list-style-type: none"> • Oral temperature: 101.0° F or greater • Axillary (under the arm) temperature: 100.0° F or greater 	School to specify based on situation.	Report Outbreaks only ^C
7. Exclude for diarrhea attributable to Giardia until asymptomatic (diarrhea ceases) or until 24 hours after initiation of antimicrobial therapy, if cleared by the student's physician to return to school.	Medical Note documenting antimicrobial therapy. A Parent Note is sufficient if diarrhea has ceased.	Report within 7 days.
8. Exclude for Head Lice (pediculosis) , <u>from the end of the school day</u> until after the first treatment with an appropriate pediculicide or other school-approved lice removal product. ^F	Parent Note documenting school-approved treatment.	Not reportable
9. Exclude for Hepatitis A virus infection , until 1 week after onset of illness or jaundice if symptoms are mild.	Medical Note documenting diagnosis	Report within 24 hours by phone
10. Exclude for Measles , until 4 days after onset of rash.	Medical Note documenting diagnosis	REPORT IMMEDIATELY by phone
11. Exclude for Mumps , until 5 days after onset of parotid gland swelling.	Medical Note documenting diagnosis	Report within 24 hours
12. Exclude for Pertussis (whooping cough) , until completion of 5 days of appropriate antimicrobial therapy, unless the student is initially diagnosed with pertussis past the infectious period (21 or more days after cough onset.)	Medical Note documenting diagnosis, plus completion of 5 days of antibiotics (unless ≥21 days post cough onset at diagnosis)	Report within 24 hours by phone
13. Exclude for Rash with fever or behavioral change , until a physician has determined that the illness is not a communicable disease.	Medical Note documenting evaluation, non-communicability.	Report Outbreaks only ^C

^F Local Education Agencies opting for more stringent "No Nit Policies" should clearly explain these policies to families when distributing materials on School Exclusion.

Students with the following conditions must be excluded from school attendance:

Exclusion Criteria	Documentation for Return	Reportable to Health Department? ^B
<p>14. Ringworm (<i>Tinea</i>)</p> <ul style="list-style-type: none"> • Ringworm of the Scalp (<i>Tinea capitis</i>). Exclude children in 1st through 5th grade with Ringworm of the Scalp (<i>Tinea capitis</i>) until oral antifungal treatment is initiated. <i>Topical treatments such as selenium sulfide shampoo (1% or 2.5%) do not take the place of oral antifungal agents. However, they can decrease fungal shedding and may help curb the spread of infection.</i> • Ringworm of the Body (<i>Tinea corporis</i>): Exclude children in 1st through 5th grade with Ringworm of the Body (<i>Tinea corporis</i>) until oral or topical antifungal treatment is initiated. If the affected area can be adequately covered, exclusion is not required, but treatment is recommended. The school or sanctioning athletic body may impose additional restrictions for PE & sports activities. • Exclusion for <i>Tinea capitis</i> or <i>Tinea corporis</i> is not mandatory for students in 6th through 12th grades, unless a student is determined to be contributing to the spread of illness in the school setting. 	<p>Medical Note documenting diagnosis and initiation of anti-fungal therapy.</p> <p>Parent Note for body ringworm</p> <p>Generally not applicable</p>	<p>Not reportable</p> <p>Not reportable</p>
15. Exclude for Rubella (German Measles) , until 7 days after onset of rash.	Medical Note documenting diagnosis	Report within 24 hours by phone
<p>16. Salmonella</p> <ul style="list-style-type: none"> • <i>Salmonella typhi</i> (typhoid fever) infection: Exclude until 24 hours without a diarrheal stool. • Nontyphoidal <i>Salmonella</i> infections do not require exclusion from school unless individuals are symptomatic, in which case the exclusion criteria in #4 would apply. 	<p>Medical Note for <i>Salmonella typhi</i>, documenting diagnosis. Parent report of symptom resolution.</p> <p>Parent Note for Symptomatic Non-typhoidal <i>Salmonella</i></p>	<p>Report within 7 days</p> <p>Report within 7 days</p>
17. Exclude for Scabies , until after appropriate scabicial treatment has been completed.	Medical Note documenting diagnosis, completion of therapy	Not reportable
18. Exclude for <i>Shigella</i> infection, until asymptomatic.	Medical Note documenting diagnosis and parent report of cessation of symptoms.	Report within 7 days

Students with the following conditions must be excluded from school attendance:

Exclusion Criteria	Documentation for Return	Reportable to Health Department? ^B
<p>19. Staphylococcal (includes MRSA & Impetigo) and Streptococcal Skin Infections ^G</p> <ul style="list-style-type: none"> Impetigo: Exclude children with Impetigo, whose lesions cannot be covered, until the student has received 48 hours of effective antimicrobial treatment, lesions are showing signs of healing (decreasing in size), and oozing has stopped. 	<p>Medical Note documenting diagnosis, 48 hours of antimicrobial therapy. Parent or school observes improvement in status.</p>	<p>Report Outbreaks only ^C</p>
<ul style="list-style-type: none"> Draining Lesions. Exclude the following students until drainage stops and the child has received at least 48 hours of effective antimicrobial treatment: <ul style="list-style-type: none"> Students with draining or oozing lesions that cannot be covered with a dressing Students with draining or oozing lesions that are covered with a dressing, but which have drainage that saturates the dressing. 	<p>Medical Note documenting evaluation and diagnosis. If diagnosis is staph or strep, note must indicate that the child has received 48+ hours of antimicrobial therapy. Parent or school observes cessation of drainage.</p>	<p>Report Outbreaks only ^C</p>
<ul style="list-style-type: none"> Non-Draining / Non-Oozing Lesions. <ul style="list-style-type: none"> Exclude children with non-draining lesions until lesions are showing signs of healing (reducing in size) If antibiotics are prescribed for non-draining lesions, children must remain out of school until they have received at least 48 hours of effective antimicrobial treatment AND lesions are showing signs of healing (decreasing in size.) 	<p>Medical Note documenting diagnosis (if staph or strep.) If antimicrobial therapy was initiated, note must indicate when 48 hours of antibiotics will have been received. School or parent observes improvement.</p>	<p>Report Outbreaks only ^C</p>
<ul style="list-style-type: none"> Sports. Children with Staphylococcal or Streptococcal lesions on uncovered skin, or with staph or strep covered lesions that are draining or oozing, may not participate in close contact sports or other athletic activities. 		
<ul style="list-style-type: none"> Contact precautions. Contact (standard) precautions, including appropriate disposal of potentially infectious materials, must be used if/when dressings are changed in the school setting. ^H 		
<ul style="list-style-type: none"> Outbreaks. DHEC may change these recommendations in the event of reported outbreaks or clusters of staph or strep illness. 		

^G Recent studies have indicated that up to 50% of impetigo lesions may be attributable to MRSA *(Methicillin-resistant *Staphylococcus aureus*.)

^H From the CDC: Use standard precautions (e.g., hand hygiene before and after contact, wearing gloves) when caring for nonintact skin or potential infections. Use barriers such as gowns, masks and eye protection if splashing of body fluids is anticipated. (<http://www.cdc.gov/Features/MRSAinSchools/>)

Students with the following conditions must be excluded from school attendance:

Exclusion Criteria	Documentation for Return	Reportable to Health Department? ^B
20. Exclude for Streptococcal pharyngitis (strep throat) , until afebrile and at least 24 hours after treatment has been initiated.	Medical Note documenting diagnosis and initiation of treatment, plus parent report of afebrile status.	Report Outbreaks only ^C
21. Exclude for Tuberculosis , until the local health department authority or <u>treating</u> physician states that the student is noninfectious.	Medical Note documenting diagnosis and noninfectious status.	Report within 24 hours
22. Varicella (chickenpox) <ul style="list-style-type: none"> Exclude for typical Varicella (chickenpox), until all lesions have dried and crusted (usually 6 days after the onset of rash.) Children with mild or breakthrough Varicella disease (typically seen in previously immunized children) may not exhibit vesicles or crusting of lesions. These students should be excluded from school until lesions fade away and no new lesions appear. 	Parent Note indicating lesions have dried/crusted. Parent Note indicating lesions are fading/resolving.	Report within 7 days Report within 7 days
23. Exclude for Varicella Herpes Zoster (shingles) with lesions that cannot be covered, until lesions are crusted. In cases where lesions can be covered, the school or sanctioning athletic body may impose additional restrictions for PE & sports activities that could result in exposure of the lesions (e.g., wrestling.)	Parent Note indicating any uncovered lesions have dried/crusted.	Report Outbreaks only ^C
24. Exclude for conditions or illnesses that DHEC or a health care provider ^I indicates warrant exclusion. This includes students determined to be contributing to the transmission of illness in the school.	Medical note addressing diagnosis and communicability.	DHEC staff are available for consultation on this exclusion.

^I "Health Care Provider," in this instance, includes School Nursing staff.

Exclusion Criteria for Students who are contacts of (exposed to) individuals with excludable conditions:

Exclusion Criteria for Exposure	Documentation for Return
<p>1. <u>When recommended by the health department</u>, contacts to</p> <ul style="list-style-type: none"> • <i>Haemophilus influenzae type b (Hib)</i>, or • <i>Neisseria meningitidis</i> (meningococcal disease) <p>should be excluded until antimicrobial treatment has been initiated.</p>	<p>Medical Note documenting initiation of Antimicrobial therapy</p>
<p>2. Pertussis (whooping cough): "Exclusion of <u>exposed people with cough illness</u> pending evaluation by a physician should be considered."^J If exclusion is recommended by physician or DHEC, exclude until (a) completion of five days of appropriate antimicrobial therapy or (b) until 21 days after last contact with an infected person.</p>	<p>Medical Note documenting 5 days of antimicrobial therapy if exposed person has a cough illness. Parent report if returning to school 21+ days after last contact.</p>
<p>3. Other conditions when recommended by DHEC or the student's healthcare provider.</p>	<p>SC DHEC will specify based upon situation.</p>
<p>4. Unimmunized school children without documentation of immunity or natural disease must be excluded as indicated below if exposed to:</p> <ul style="list-style-type: none"> • Measles: Exclude for 21 days after onset of rash in last case of measles in the affected school or community.^K Students may return immediately following receipt of MMR vaccine, if vaccine is received within three days of exposure. Pregnant students should not receive MMR immunization.^L • Mumps: Exclude for 26 days after the onset of parotitis in the last person with mumps in the affected school. Students may return immediately following receipt of MMR vaccine, if vaccine is received within three days of exposure. Pregnant students should not receive MMR immunization.^L • Rubella: Exclude for 26 days after the onset of rash in the last person with rubella in the affected school or community. Students may return immediately following receipt of MMR vaccine, if vaccine is received within three days of exposure. Pregnant students should not receive MMR or rubella immunization.^L • Varicella (chicken pox): Exclude unimmunized students who are covered by the Varicella vaccine requirement (grades K-8) from day 10 to day 21 after the onset of rash in the last person diagnosed with Varicella in the affected school.^{L, M} 	<p>SC DHEC will provide guidance on an individual basis regarding when a student who is immunocompromised and unimmunized may return to the school setting following an exposure to one of these conditions.</p>

^J 2006 *Red Book*, page 504.

^K "Exclude for 21 days after onset of rash in last case of measles..." This criterion is more stringent than what appears in the 2006 *Red Book* (p. 451), but is consistent with newer research. The SC DHEC Bureau of Disease Control (803.898.0861) is available for consultation on exclusion for measles exposure during an outbreak.

^L SC DHEC should be consulted immediately about pregnant, non-immunized students who are exposed to measles, mumps, rubella or varicella.

^M Mild break-through cases of Varicella (occurring in immunized persons) are generally considered to be less infectious than cases in unimmunized persons. Consult with SC DHEC as needed for exclusion guidance in on-going outbreaks of Varicella or if/when exclusion may be extended over than one incubation period (i.e., over 21 days).

Children with the following conditions do not need to be excluded from school, so long as they are healthy enough to participate in routine curricular activities:

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| <ul style="list-style-type: none"> • Bronchitis or Common Colds: Exclusion is not warranted even if illness is associated with green or yellow nasal discharge, as long as the student does not have a fever or any of the other excludable symptoms described in this document. • Croup • Cytomegalovirus (CMV) infection • Ear infection • Fifth Disease (Parvovirus B19 infection): Individuals are no longer contagious once the rash appears, and they cannot be diagnosed with Fifth Disease before the rash appears. | <ul style="list-style-type: none"> • Chronic Hepatitis B or Chronic Hepatitis C ^N • Human Immunodeficiency Virus (HIV) infection ^N • Mononucleosis, if able to participate in routine activities and cleared for re-admission by healthcare practitioner. • Pinworms • Pneumonia • Non-spreading Rash, without fever • Red eyes without yellow or green discharge, fever, eye pain or matting • Respiratory Syncytial Virus (RSV) • Warts |
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References:

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- Centers for Disease Control and Prevention. 2006. Outbreak of Varicella among vaccinated children -- Michigan, 2003. *Morbidity and Mortality Weekly Report*, 53, 18, pp. 389-391.
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- SC Department of Social Services, Division of Child Day Care Licensing and Regulatory Services. 2004 Revisions to Regulations 114-500 through 114-509.

^N The SC DHEC HIV/STD Division (1.800.322.AIDS) is available for consultation regarding infection control issues raised by the presence of students with blood-borne illnesses (HIV, chronic Hepatitis B, chronic Hepatitis C, etc.) in school.